| Case 16-08352 Doc 1 Fill in this information to identify your case: | | Entered 03/10/16 14:42:00 age 1 of 70 | Desc Main |
|---------------------------------------------------------------------|-------------------------------|------------------------------------------|---------------------|
| United States Bankruptcy Court for the: | | | |
| Northern District of: Illinois (State) | | | |
| Case number (if known) | Chapter you are filing under: | | |
| | Chapter 7 Chapter 11 | | |
| | Chapter 12 | | Check if this is an |
| | Chapter 13 | | amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---------------------------------------------------------------------|----------------------------|-----------------------------------------------|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name | Dimarie First name | First name |
| Write the name that is on your government-issued | i iist iiaine | |
| picture identification (for example, your driver's | Middle name Vazquez | Middle name |
| license or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last | First name | First name |
| 8 years | Middle name | Middle name |
| Include your married or maiden names. | midule name | ivilidae name |
| madernames. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX- <u>9434</u> | xxx - xx- |
| Security number or | OR | OR |
| federal Individual Taxpayer Identification | 9 xx - xx- | 9 xx - xx- |
| number (ITIN) | | |

DimarieCase 16-08352 Doc 1 Filed 03/120/126 Entered 03/40/16 /14:42:00 Desc Main Debtor 1 Page 2 of 70 Document Print **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 2274 Jericho Rd Number Street Number Street Apt C7 Illinois 60538 Montgomery Zip Code City State City State Zip Code Kendall County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Document Document

Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for □ No. bankruptcy within the last 8 years? ✓ Yes. District Northern District of Illinois When 11/25/2013 Case number 13-45644 MM / DD / YYYY Northern District of Illinois When District 12/3/2009 09-45794 Case number MM / DD / YYYY District Northern District of Illinois When 7/15/2007 Case number 07-12594 MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or Yes, Debtor being filed by a Relationship to you spouse who is not When District Case number, if known filing this case with MM / DD / YY you, or by a Debtor Relationship to you business partner, or District When Case number, if known by an affiliate? 11. Do you rent your No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Dimarie Case 16-08352 Doc 1 Filed 03/120/126 Entered 03/40/16 /14/42:00 Desc Main Debtor 1 Page 4 of 70 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building

that needs urgent

repairs?

State

City

Zip Code

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Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5:

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of bankruptcy petition, and I received a certificate of completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. that you developed with the agency. I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of bankruptcy petition, but I do not have a certificate of completion. completion. Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment plan, if any. plan, if any. I certify that I asked for credit counseling services from I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those an approved agency, but was unable to obtain those services during the 7 days after I made my request, and services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver exigent circumstances merit a 30-day temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required filed for bankruptcy, and what exigent circumstances required you to file this case. you to file this case. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your payment plan you developed, if any. If you do not do so, your case may be dismissed. case may be dismissed. Any extension of the 30-day deadline is granted only for cause Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental Incapacity. Incapacity. I have a mental illness or a mental deficiency that makes me incapable of

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the

about finances.

realizing or making rational decisions

internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

DimarieCase 16-08352 Doc 1 Filed 03/120/126 Entered 03/40/16 /14/42:00 Desc Main Debtor 1 Page 6 of 70 Document Document **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ✓ No. and administrative ٦ Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Dimarie Vazquez Signature of Debtor 2 Signature of Debtor 1 Executed on 3/10/2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Dimarie Case 16-08352 Doc 1 Filed 03/120/126 Entered 03/120/126 (i) Ai Ai A2: 00 Desc Main Document Plane Page 7 of 70

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

X

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| rrect. | | | | |
|---------------------------------------------------|--------|--------|-----------------------------|--|
| /s/ Brent Ingram Signature of Attorney for Debtor | | _ Date | 3/10/2016 MM / DD / YYYY | |
| Brent Ingram Printed name | | | | |
| Semrad Law Firm Firm name | | | | |
| Number | Street | | | |
| City | State | | Zip Code | |
| Contact phone | | E | mail address | |
| Bar number | | | tate | |

Fill in this information to identify your case: Debtor 1 Dimarie Vazquez First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$2,650.44 1b. Copy line 62, Total personal property, from Schedule A/B \$2,650.44 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$400.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$20,262.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$20,662.00 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$3,357.25 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J......

\$3,335.00

Debtor 1 Dimari Case 16-08352 Doc 1 Filed 03/140/16 Entered 03/140/16 (144) 42:00 Desc Main

| | First Name Middle Name Docume Page 9 of | 70 | oo mani |
|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|------------|
| Par | t4: Answer These Questions for Administrative and Statistical Records | | |
| 6. / | are you filing for bankruptcy under Chapters 7, 11, or 13? | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the | ne court with your other schedules. | |
| | ✓ Yes. | | |
| 7. \ | What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those incurred by an individed family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 | | |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the this form to the court with your other schedules. | form. Check this box and submit | |
| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | ne from Official | \$4,749.66 |
| 9. | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | | |
| | From Part 4 on Schedule E/F, copy the following: | Total claim | |
| | 9a. Domestic support obligations (Copy line 6a.) | \$0.00 | |
| | 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 | |
| | 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 | |

\$0.00

\$0.00

\$0.00

\$0.00

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

| | Case 16-08352 | Doc 1 | Filed 03/10/16 | Entered 03/10/16 1 | L4:42:00 D | Desc Main |
|----------------------|-------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------|---------------------------------------------|------------------------------------------|--------------------------------------------------------------------|
| Fill in this | information to identify your case: | | | | | |
| Debtor 1 | Dimarie | | Vazqu | ez | | |
| | First Name | Middle 1 | Name Last N | ame | | |
| Debtor 2 | if filing) First Name | NAC LUL N | Name - Land N | | | |
| Spouse, | ii iiiiig) First Name | Middle N | Name Last N | ame | | |
| Jnited St | ates Bankruptcy Court for the: | Northern | District of III | linois State) | | |
| Case nun | | | | | | |
| . , | | | | | | Check if this is an |
| | al Form 106A/B | -1 | | | | amended filing |
| cne | dule A/B: Propei | rty | | | | 12/ |
| rite your Part 1: | ble for supplying correct inform name and case number (if kno Describe Each Residence u own or have any legal or equ | e, Building, L | ery question. Land, or Other Rea | I Estate You Own or Hav | | |
| | No. Go to Part 2 | | | | | |
| Ш | Yes. Where is the property? | | Mile at in the amount of | Ohaali all that amali | De rest de divet se su | and deime as assessations. Dut |
| 1.1 | | | What is the property Single-family home | | the amount of any s | red claims or exemptions. Put secured claims on <i>Schedule D:</i> |
| ••• | Street address, if available, or o | ther description | Duplex or multi-uni | | Creditors Who Hav | ve Claims Secured by Property. |
| | | | Condominium or co | poperative | Current value of | |
| | | | Manufactured or mo | obile home | entire property? | portion you own? |
| | Ni wali an Otmant | | Land | | D | |
| | Number Street | | Investment property | | Describe the natu interest (such as f | re of your ownership fee simple, tenancy by |
| | City State | Zip Code | Timeshare Other | | | a life estate), if known. |
| | Oity State | Zip Oode | Ш | | | |
| | | | | in the property? Check one. | Check if this i | is community property |
| | | | Debtor 1 only | | (see instructi | ons) |
| | | | Debtor 2 only Debtor 1 and Debto | or 2 only | | |
| | | | At least one of the | • | | |
| | | | _ | | ovek en legel | |
| | | | property identification | u wish to add about this item, n number: | such as local | |
| If vou | own or have more than one, list he | ere: | , ,, , | | | |
| , | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | What is the property | | | red claims or exemptions. Put |
| 1.2 | Ota - 1 - 1 | di andra di Car | Single-family home | | | secured claims on Schedule D: ve Claims Secured by Property. |
| | Street address, if available, or o | ther description | Duplex or multi-uni | t building | | , , |
| | - | | Condominium or co | operative | Current value of a entire property? | the Current value of the portion you own? |
| | | | Manufactured or mo | obile home | | |
| | Number Street | | Land | | Doscribo the natu | re of your ownership |
| | Number Street | | Investment property Timeshare | | interest (such as f | fee simple, tenancy by |
| | City State | Zip Code | Other | | the entireties, or a | a life estate), if known. |
| | | - F | Who has an interest Debtor 1 only Debtor 2 only Debtor 1 and Debto | in the property? Check one. | Check if this (see instructi | is community property ons) |
| | | | At least one of the | | | |
| | | | | | ough on least | |
| | | | other information you property identification | u wish to add about this item, n number: | Such as local | |

| | DimarieCase 16-08 | 352 <u>Doc 1</u> Middle Name | Filed 03/120/16 Entered 03/10/16 | 6 Ak4ki42: <u>00 Desc Main</u> |
|-------------------------------|--------------------------------------|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1.3Stro | eet address, if available, or o | | Documeriname Page 11 of 70 What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own? |
| Nui Cit | mber Street y State | Zip Code | Investment property Timeshare Other | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. |
| you ha | ave attached for Part 1. Wr | rite that number he | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, property identification number: all of your entries from Part 1, including any entries re. | for pages |
| Do you o you own th | | | | |
| 3. Cars, vo No No Ye | ans, trucks, tractors, sport ut o | ou lease a vehicle, al | in any vehicles, whether they are registered or not? It so report it on Schedule G: Executory Contracts and Unexcycles | |
| □ No | ans, trucks, tractors, sport ut o | ou lease a vehicle, al | so report it on Schedule G: Executory Contracts and Unex | |

| Debtor 1 | DimarieCase 16-08352 Doc 1 | Filed 03/120/126 Entered 03/120/126 | ∂∂44442: <u>00 Des</u> | c Main | |
|----------|----------------------------------------------|----------------------------------------------------------|-------------------------------------------------|---------------------------|--|
| | First Name Middle Name | Document Page 12 of 70 | | | |
| 3.3 | Make | Who has an interest in the property? Check | Do not deduct secured cl | · | |
| | Model: | one. | the amount of any secure | | |
| | Year: | Debtor 1 only | Creditors Who Have Cla | ims Secured by Property. | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see | | | |
| | | instructions) | | | |
| 3.4 | Make | Who has an interest in the property? Check | Do not deduct secured cl | aims or exemptions. Put | |
| | Model: | one. | the amount of any secure | red claims on Schedule D: | |
| | Year: | Debtor 1 only | Creditors Who Have Claims Secured by Property. | | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see | | | |
| | | instructions) | | | |
| 4.1 | Yes Make | Who has an interest in the property? Check | Do not deduct secured cl | · | |
| | Model: | one. | the amount of any secured claims on Schedule D: | | |
| | Year: | Debtor 1 only | Creditors Who Have Cla | ims Secured by Property. | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | - | |
| | | Check if this is community property (see | | | |
| | | instructions) | | | |
| 4.2 | Make | Who has an interest in the property? Check | Do not deduct secured cl | aims or exemptions. Put | |
| | Model: | one. | the amount of any secure | ed claims on Schedule D: | |
| | Year: | Debtor 1 only | Creditors Who Have Cla | ims Secured by Property. | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see instructions) | | | |
| 5. Add | the dollar value of the portion you own for | all of your entries from Part 2, including any entries t | for pages | 500.00 | |
| you ha | ve attached for Part 2. Write that number he | re | > | | |

Debtor 1 DimarieCase 16-08352 First Name Doc 1 Filed 03/140/146 Entered 03/10/116/14442:00 Desc Main Documenter Page 13 of 70

| Do you own or n | ave any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| 6. Household good | | |
| → | pliances, furniture, linens, china, kitchenware | |
| No | | |
| ✓ Yes. Describe | Used household goods | \$625.00 |
| | ns and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ns; electronic devices including cell phones, cameras, media players, games | |
| No | | |
| Yes. Describe | | |
| | and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; oin, or baseball card collections; other collections, memorabilia, collectibles | |
| ✓ No | | |
| Yes. Describe | | |
| | corts and hobbies hotographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ks; carpentry tools; musical instruments | |
| ∕ No | | |
| Yes. Describe | | |
| | | |
| _ | fles, shotguns, ammunition, and related equipment | |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday | fles, shotguns, ammunition, and related equipment v clothes, furs, leather coats, designer wear, shoes, accessories | |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No | clothes, furs, leather coats, designer wear, shoes, accessories | |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday | | \$525.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry | Used clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | \$525.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv | Used clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | \$525.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv | Used clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | \$525.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv | Used clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, rer | \$525.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca | Used clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, rer | \$525.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca | Used clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, rer | \$525.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca | Used clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, rer | \$525.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca | Used clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er lise tts, birds, horses | \$525.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca | Used clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er lise tts, birds, horses | \$525.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca | Used clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er lise tts, birds, horses | \$525.00 |

Debtor 1 Dimarie Case 16-08352 Doc 1 Filed 03/120/126 Entered 03/120/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24-0/126 (1)24

Describe Your Financial Assets Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes 17.1. Checking account: US Bank \$0.44 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about

them

DimarieCase 16-08352 Doc 1 Document Page 15 of 70 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Yes. Give specific information about Issuer name: them.... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Type of account: Institution name: Yes. List each 401 account separately. 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **✓** No Institution name: Yes.... Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **✓** No Issuer name and description: Yes....

| Debt | or 1 | Dimarie Cas First Name | e 10 | 6-08352 | Doc 1 | | 03/120/126 cumetht | | | l.6 (1k.4k.42: <u>00</u> | Desc Main |
|------|----------|-----------------------------------------|----------|--------------------------------|------------------------------------|--------------|------------------------------------------|------------|---------------------|---------------------------------|-----------------------------------------------------------------------------------|
| 24. | | | | tion IRA, in a 529A(b), and | | a qualifie | d ABLE progra | m, or und | ler a qualified st | ate tuition program | |
| | | No In Yes | stitutio | n name and d | escription. Sep | arately file | the records of a | ny interes | s.11 U.S.C. § 52′ | I (c): | |
| 25. | | sts, equitabl rcisable for y | | | s in property | (other th | an anything lis | ed in line | e 1), and rights o | r powers | |
| | ✓ | No | | | | | | | | | |
| | | Yes. Describ | e | | | | | | | | |
| 26. | Еха | | et dom | | | | r intellectual pro yalties and licens | | ments | | |
| 27. | | | ıg peri | | eneral intangil e licenses, coo | | ssociation holdir | gs, liquor | licenses, professi | onal licenses | |
| Mor | ney (| or propert | y ow | red to you? | ? | | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Тах | refunds owe | d to y | ou | | | | | | | |
| | | No | | | | | | | | To do role | |
| | Ш | Yes. Give spe about th | | formation cluding whethe | er | | | | | Federal: | |
| | | • | - | ed the returns | | | | | | State: | |
| 29. | | nily support | · | | ny, spousal sup | oport, chilo | I support, mainte | nance, div | orce settlement, p | Local: roperty settlement | |
| | ✓ | No | | | | | | | | | |
| | | Yes. Give spe | cific in | formation | | | | | | Alimony: | |
| | | | | | | | | | | Maintenance: | |
| | | | | | | | | | | Support: | |
| | | | | | | | | | | Divorce settlemen | t: |
| | | | | | | | | | | Property settlemer | nt: |
| 30. | | <i>mples:</i> Unpaid | wage | - | urance payme paid loans you | | - | pay, vacat | ion pay, workers' c | ompensation, | |
| | | No | | | | | | | | | |
| | Ш | Yes. Describe | : | | | | | | | | |

| Debt | tor 1 | DimarieCase 16 First Name | 6-08352 | Doc 1 Middle Name | Filed 03/126 Documen | | Entered @3/ Page 17 of 7 | 1 .0√1.6 (1k4k42: <u>00 </u> | Desc Main |
|------|------------|-----------------------------------------------------|-------------------|----------------------|-----------------------------------------------|----------|-----------------------------|-----------------------------------------------------------------------|----------------------------------------------------------------------------------|
| 31. | | rests in insurance mples: Health, disabi | | ance; health | | | edit, homeowner's, or | | |
| | ✓ | No Yes. Name the insur of each policy and lis | | | Company name: Term | | | Beneficiary: | Surrender or refund value: |
| 32. | If yo prop | | of a living trust | | omeone who has die ceeds from a life insu | | policy, or are currently | entitled to receive | |
| 33. | | | | | u have filed a lawsuince claims, or rights to | | ade a demand for pa | ayment | |
| | | No Yes. Describe | | | | | | | |
| 34. | | er contingent and et off claims | unliquidated | claims of e | very nature, includi | ng co | unterclaims of the d | ebtor and rights | |
| | ✓ | No Yes. Describe | | | | | | |] |
| 35. | _ | financial assets yo | u did not alre | ady list | | | | | _ |
| | | Yes. Describe | | | | | | |] |
| 36. | | | - | | | - | es for pages you ha | | \$0.44 |
| Part | 5: | Describe Any B | susiness-Re | elated Pro | operty You Own | or Ha | ave an Interest li | n. List any real estate | in Part 1. |
| 37. | Doy | ou own or have ar | ıy legal or eqι | itable inter | est in any business | -relate | d property? | | |
| | | No. Go to Part 6. Yes. Go to line 38. | | | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | Acc | ounts receivable or | commissions | s you alread | dy earned | | | | |
| | | No Yes. Describe | | | | | | | T |
| 39. | | ce equipment, furn mples: Business-rela | | | nodems, printers, cop | iers, fa | x machines, rugs, tele | phones, desks, chairs, electro | nic devices |
| | \Box | No Yes. Describe | | | | | | |] |
| | | | | | | | | | |

| | tor 1 | DimarieCase 16 First Name | | Doc 1 | Filed 03/120/126 Document | Page 18 of 70 | £6/1k4v42: <u>00 D</u> | esc Main | |
|--------------|-----------------------------|---------------------------------------------------|-------------------|------------------|--------------------------------|-----------------------------|------------------------|-------------------------------|---------|
| 40. | Mac | chinery, fixtures, eq | uipment, sup | plies you us | se in business, and tools | of your trade | | | |
| | $ \overline{\mathbf{A}} $ | No | | | | | | | |
| | | Yes. Describe | | | | | | | |
| 41. | Inve | entory | | | | | | | |
| | $ \sqrt{} $ | No | | | | | | | |
| | | Yes. Describe | | | | | | | |
| 42. | Inte | rests in partnershi | ps or joint ve | entures | | | | ' | |
| | ✓ | No | | | | | | | |
| | | Yes. Give specific | | | Name of entity: | | % of ownership: | | |
| | | information about | | | | | | | |
| | | them | | | | | | | |
| | | | | | | | | | |
| 43. (| Custo | omer lists, mailing | lists. or othe | r compilatio | ns | | | <u> </u> | |
| | V | _ | , , , , , , , | • | | | | | |
| | = | | clude nersonal | llv identifiable | e information (as defined in 1 | 11 U.S.C. & 101(41A))? | | | |
| | _ | | 5.440 po.00a | , | | | | | |
| | | ∐ No | | | | | | | |
| | | Yes. Descri | ibe | | | | | | |
| 44. | Any | business-related p | roperty you | did not alread | dy list | | | | |
| | ~ | No | | | | | | | |
| | = | Yes. Give specific | | ; | | | | | |
| | _ | information | | • | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | • | | | | | |
| | | | | • | | | | | |
| | | | | | | | | | |
| | | | | = | | | | | |
| | | | - | | | for pages you have attach | | | |
| Part | 6: | Describe Any F | arm- and (| Commerci | al Fishing-Related P | roperty You Own or H | lave an Interest In | | |
| 46. | Do | you own or have ar | ny legal or eq | uitable inter | rest in any farm- or comm | ercial fishing-related prop | erty? | | |
| | | No. Go to Part 7. | - ' | | - | | | Current value | |
| | Ħ | Yes. Go to line 47. | | | | | | portion you o Do not deduct: | |
| | | | | | | | | claims | secureu |
| | | | | | | | | or exemptions | |
| 47. | | m animals <i>mpl</i> es: Livestock, pou | ıltrv. farm-raise | ed fish | | | | | |
| | | | , | od nom | | | | | |
| | 뇓 | No Vaa Dagariba | | | | | | 1 | |
| | Ш | Yes. Describe | | | | | | | |

| Deb | tor 1 | DimarieCase 16 First Name | 6-08352 | Doc 1 | Filed 03/120/12 Document | | 3/110/116/1k4:42: <u>00</u> 70 | Desc | <u>Main</u> |
|--------------|----------|-------------------------------------------|-----------------|---------------|-----------------------------|--------------------|-----------------------------------|--------|-------------|
| 48. | Cro | ps-either growing | or harvested | I | Boodinone | . ago 20 0. | . • | | |
| | ✓ | No | | | | | | | |
| | | Yes. Describe | | | | | | _ | |
| 49. | Farı | n and fishing equip | oment, imple | ements, mach | inery, fixtures, and to | ols of trade | | | |
| | ✓ | No | | | | | | | |
| | | Yes. Describe | | | | | | | |
| 50. | Farı | m and fishing supp | lies, chemic | als, and feed | | | | | |
| | | No | | | | | | | |
| | | Yes. Describe | | | | | | | |
| 51. | | farm- and commer mples: Livestock, pou | | | ty you did not alread | y list | | | |
| | ✓ | No | | | | | | | |
| | | Yes. Describe | | | | | | | |
| | | L | | | | | | | |
| | | | - | | 6, including any entr | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Part | | Describe All Pro ou have other prop | | | ave an Interest in | That You Did No | ot List Above | | |
| 53. | Exar | <i>nples:</i> Season tickets | s, country club | membership | iot aiready list? | | | | |
| | ✓ | No | | | | | | | |
| | | Yes. Give specific | | | | | | | |
| | | information | | | | | | | |
| | | | | | | | | [| |
| 54. A | dd th | e dollar value of all | of your entr | ies from Part | 7. Write that number | here | | .▶ | |
| | | | - | | | | | [| |
| | | | | | | | | | |
| Part | 8: | List the Totals of | of Each Pa | rt of this F | orm | | | | |
| 55. I | Part 1 | : Total real estate, I | ine 2 | | | | > | | |
| 56 • | nart ? | total vehicles, line | 5 | | | | | | |
| | | | | itoms line 16 | <u>\$1500</u> | | | | |
| | | : Total personal and | | items, ine is | 9 \$1150 | 0.00 | | | |
| | | : Total financial ass | • | | <u>\$0.44</u> | | | | |
| | | : Total business-re | | • | | | | | |
| | | : Total farm- and fi | _ | | ne 52 | | | | |
| | | : Total other prope | - | | | | | | |
| 62. | Total | personal property. | Add lines 56 t | through 61 | \$2650 |).44 | Copy paragraph property to | otal 🕨 | + \$2650.44 |
| | | | | | | | Copy personal property to | Jiai 🚩 | |
| 62 T | otal a | of all property on Se | shadula A/P | Add line EE + | lino 62 | | | | \$2650.44 |

| Fill in | n this informa | Case 16-08352 ation to identify your case: | Doc 1 Filed 03 | /10/16 Entered 03/ | 10/16 14:42:00 | Desc Main |
|-------------------------------------|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| | tor 1 | Dimarie First Name | Middle Name | Vazquez Last Name | | |
| | tor 2 buse, if filing) | First Name | Middle Name | Last Name | | |
| Unite | ed States Ba | nkruptcy Court for the: | Northern | District of Illinois | | |
| | e number lown) | | | (State) | | |
| Off | ficial F | orm 106C | | | _ | Check if this is a amended filing |
| Sc | hedule | C: The Prop | erty You Claim | as Exempt | | 12/1 |
| s to exer ece exer orop | o state a s mpted up vive certai mption of perty is de 1: Identi Which set | pecific dollar amount to the amount of an in benefits, and tax- 100% of fair marked etermined to exceed the Property You of exemptions are you de claiming state and federal exemptions. | nt as exempt. Alternating applicable statutory exempt retirement fur a value under a law that amount, your exempt laiming? Check one only, even nonbankruptcy exemptions. 17 ons. 11 U.S.C. § 522(b)(2) | vely, you may claim the for limit. Some exemptions ands—may be unlimited in at limits the exemption to emption would be limited and if your spouse is filing with your | ull fair market value—such as those food ollar amount. How a particular dollar is to the applicable s | r health aids, rights to wever, if you claim an amount and the value of the |
| | | | nd line Current value of | Amount of the exemption ye | ou claim Spe | cific laws that allow exemption |
| | on Schedu | le A/B that lists this pro | perty the portion you own | Check only one box for each e. | xemption. | |
| | | | Copy the value from Schedule A/B | | | |
| | Brief description: | Chevy, Impala | \$1,500.00 | 7 | | 735 ILCS 5/12-1001(c) |
| | Line from Schedule A | | Ψ1,000.00 | \$1,100.0 100% of fair market value, applicable statutory limit | | |
| | Brief | IIC Dawle | \$0.44 | | | 735 ILCS 5/12-1001(b) |
| | description: Line from Schedule A | US Bank /B:17 | φυ.+++ | \$0.44 100% of fair market value, applicable statutory limit | up to any | |
| 3. | (Subject to a | adjustment on 4/01/16 and | , , | ,, | , | |

No Yes

Filed 03/120/126 Entered 03/120/126/124:42:00 Desc Main Document Page 21 of 70 Debtor 1 DimarieCase 16-08352 First Name Doc 1

Part 2: Additional Page

| • | on of the property and line VB that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|-----------------------------------------------------|------------------------------------------------------------|------------------------------------------------------------------------|---------------------------------------------------------------------------|------------------------------------|
| Brief description: Line from Schedule A/B: | Used household goods 06 | \$625.00 | \$625.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Line from Schedule A/B: | Used clothing | \$525.00 | \$525.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) |
| Brief description: Line from Schedule A/B: | <u>Term</u> 31 | none | 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(h)(3) |
| Brief description: Line from Schedule A/B: | <u>401</u> | none | 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1006 |

| | Case 16-08352 | Doc 1 Filed (| 03/10/16 Entered 03/10 | /16 14:42:00 | Desc Main | |
|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|--------------------------------------------------------|--------------------------------------------------------|-----------------------------------|
| Fill in this informa | ation to identify your case: | | | 710 14.42.00 | Desc Main | |
| Debtor 1 | Dimarie | | Vazquez | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | ankruptcy Court for the: <u>N</u> | lorthern | District of Illinois | | | |
| Case number | | | (State) | | | |
| (If known) | | | | | | |
| Official F | orm 106D | | | | | eck if this is a ended filing |
| Schedu | le D: Credito | rs Who Hav | e Claims Secured | by Prope | rty | 12/1 |
| form. On the 1. Do any cre No. Ch | top of any additional ditors have claims secured neck this box and submit this Il in all of the information belo | pages, write your d by your property? form to the court with you | he Additional Page, fill it out, name and case number (if kn r other schedules. You have nothing else | own). | , | |
| | All Secured Claims | | | | | |
| claim. If mor | | articular claim, list the other | claim, list the creditor separately for each er creditors in Part 2. As much as ditor's name. | Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 Tri State Fir | | — Describe the propert | y that secures the claim: | \$400.00 | \$1,500.00 | \$0.00 |
| Creditor's Na P.O. Box 25 | | | y that secures the claim. | - | | |
| Number | Street | Chevy, Impala Value: | | | | |
| | | | e, the claim is: Check all that apply. | | | |
| Wilkes Bar | re Pennsylvaniå8703 | Contingent | | | | |
| City | State ZIP Code | Unliquidated | | | | |
| • | the debt? Check one. | Disputed | | | | |
| ✓ Debtor | 1 only | Nature of lien. Check | all that apply. | | | |
| Debtor | 2 only | An agreement you | ı made (such as mortgage or secured | | | |
| = | 1 and Debtor 2 only | car loan) | ······································ | | | |
| At least | one of the debtors and | Statutory lien (suc | h as tax lien, mechanic's lien) | | | |
| another | | Judgment lien from | | | | |
| | if this claim relates to a unity debt | Other (including a | | | | |
| | vas incurred | Last 4 digits of acco | unt number | _ | | |
| | Add the dollar value of you | ur entries in Column A | on this page. Write that number | \$400.00 | | |

| Fill in t | this informa | Case 16-08352 | | 103/10/16 | Entered 03 | /1.0/16 14:42:00 | Desc | Main | |
|--------------------------------------------|----------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------------------|------------------------------------------------|-----------------------------------------|
| Debto | r 1 | Dimarie First Name | Middle Name | Vazqu Last N | | | | | |
| Debto (Spous | | First Name | Middle Name | Last N | lame | | | | |
| | | nkruptcy Court for the: | Northern | District of III | inois State) | | | | |
| Case I | number wn) | | | | _ | | _ | | |
| Offic | cial Fo | rm 106E/F | | | | | Chec | k if this is an | amended filing |
| Sch | nedu | le E/F: Cre | ditors Who | Have U | nsecure | d Claims | | | 12/15 |
| party to 106A/B are listo the box | o any exect b) and on Sed ed in Sche kes on the | eutory contracts or une Schedule G: Executory edule D: Creditors Whe left. Attach the Contir | ole. Use Part 1 for credito xpired leases that could Contracts and Unexpire to Hold Claims Secured louation Page to this page Y Unsecured Claim | result in a claim. ed Leases (Officia by Property. If me e. On the top of a | . Also list executor al Form 106G). Do ore space is neede | ry contracts on <i>Schedu</i> not include any credito ed, copy the Part you no | le A/B: Prop rs with parti eed, fill it out | erty (Official ally secured , number the | I Form I claims that e entries in |
| - | _ ′ | ditors have priority unso | secured claims against y | ou? | | | | | |
| id p F | dentify wha lossible, list Part 1. If mo | t type of claim it is. If a cla t the claims in alphabetic ore than one creditor hold | claims. If a creditor has maim has both priority and no all order according to the class a particular claim, list the laim, see the instructions for | onpriority amounts reditor's name. If y e other creditors ir | , list that claim here rou have more than n Part 3. | and show both priority and | d nonpriority a | mounts. As n | much as |
| | | | | | | | Total claim | Priority amount | Nonpriority amount |
| | | | | | | | | | |

Doc 1 DimarieCase 16-08352 Debtor 1 Page 24 of 70 Documethe ne List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 AD ASTRA RECOVERY SERV \$703.00 Last 4 digits of account number 1126 Nonpriority Creditor's Name 7330 W 33RD ST N STE 118 When was the debt incurred? 8/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **WICHITA** Kansas 67205 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.2 ADVANCED COLLECTION BU \$9,789.00 7901 Last 4 digits of account number Nonpriority Creditor's Name Po Box 560063 When was the debt incurred? 4/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent 32956 Rockledge Florida Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.3 ATG CREDIT \$92.00 Last 4 digits of account number 8022 Nonpriority Creditor's Name 1700 W CORTLAND ST STE 2 When was the debt incurred? 1/1/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent CHICAGO Illinois 60622 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed V Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify

Debts to pension or profit-sharing plans, and other similar debts

Debtor 1 Dimarie Case 16-08352 Doc 1 Filed 03/120/126 Entered 03/120/126 Entered 03/120/126 Desc Main
First Name Middle Name Document Page 25 of 70

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total cla | | | | | |
|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------|----------|--|--|
| 4.4 | BERKS CC | — Last 4 digits of account number 8896 | \$0.00 | | |
| | Nonpriority Creditor's Name P.O. BOX 2171 | When was the debt incurred? 6/1/2012 | | | |
| | Number Street | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | |
| | SINKING SPRING Pennsylvania 19608 | Contingent | | | |
| | City State Zip Code | Unliquidated | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 1 and Debtor 2 only | Student loans | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Is the claim subject to offset? | ✓ Other. Specify | | | |
| | ✓ No | | | | |
| | Yes | | | | |
| 4.5 | CACH, LLC | Lock A digita of account number 0400 | \$500.00 | | |
| | Nonpriority Creditor's Name | — Last 4 digits of account number 9182 | 4000.00 | | |
| | 4340 South Monaco St 2nd FL Number Street | When was the debt incurred? 3/1/2015 | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | |
| | Denver Colorado 80237 | Contingent | | | |
| | City State Zip Code | Unliquidated | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 1 and Debtor 2 only | Student loans | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that | | | |
| | | you did not report as priority claims | | | |
| | Check if this claim relates to a community debt | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | | | |
| | Is the claim subject to offset? | Other. Specify | | | |
| | Yes | | | | |
| 46 | - | | Φο οο | | |
| 4.6 | CITIFINANCIAL Nonpriority Creditor's Name | Last 4 digits of account number1302 | \$0.00 | | |
| | 104-Q CARRBORO PLAZA Number Street | When was the debt incurred? 9/1/2004 | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | |
| | OARRODO Needlo Occidente 07740 | Contingent | | | |
| | CARRBORO North Carolina 27510 City State Zip Code | Unliquidated | | | |
| | Who incurred the debt? Check one. | Disputed | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 2 only | Student loans | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Is the claim subject to offset? | Other. Specify | | | |
| | ✓ No ☐ Yes | | | | |

Debtor 1 Dimarie Case 16-08352 Doc 1 Filed 03/120/126 Entered 03/120/126 ill Ai: 42:00 Desc Main
First Name Middle Name Docume 12 Page 26 of 70

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim | | | | | |
|---------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------|----------|--|--|
| 4.7 | DSG COLLECT | - Last 4 digits of account number 2245 | \$175.00 | | |
| | Nonpriority Creditor's Name 2250 E Devon # 352 | When was the debt incurred? 8/1/2011 | | | |
| | Number Street | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | |
| | Des Plaines Illinois 60018 | Contingent | | | |
| | City State Zip Code | Unliquidated | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 1 and Debtor 2 only | Student loans | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Is the claim subject to offset? | ✓ Other. Specify | | | |
| | No | | | | |
| | Yes | | | | |
| 4.8 | DSG COLLECT | Last A Parks of account number 2004 | \$175.00 | | |
| | Nonpriority Creditor's Name | — Last 4 digits of account number0994 | Ψ170.00 | | |
| | 2250 E Devon # 352 Number Street | When was the debt incurred? 10/1/2011 | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | |
| | Des Plaines Illinois 60018 | Contingent | | | |
| | City State Zip Code | Unliquidated | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | | | |
| | | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | Student loans | | | |
| | <u>'</u> | Obligations arising out of a separation agreement or divorce that | | | |
| | At least one of the debtors and another | you did not report as priority claims | | | |
| | Check if this claim relates to a community debt | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | | | |
| | Is the claim subject to offset? | Other. Specify | | | |
| | Yes | | | | |
| 40 | - | | * | | |
| 4.9 | I C SYSTEM INC Nonpriority Creditor's Name | Last 4 digits of account number 3001 | \$792.00 | | |
| | PO BOX 64378 | When was the debt incurred? 8/1/2015 | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | |
| | | Contingent | | | |
| | SAINT PAUL Minnesota 55164 City State Zip Code | Unliquidated | | | |
| | Who incurred the debt? Check one. | Disputed | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 2 only | Student loans | | | |
| | Debtor 1 and Debtor 2 only | = | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Is the claim subject to offset? | ✓ Other. Specify | | | |
| | <u>✓</u> No | | | | |
| | Yes | | | | |

Debtor 1 Dimari Case 16-08352 Doc 1 Filed 03/140/426 Entered 03/140/146 (Au4)42:00 Desc Main First Name Document Page 27 of 70

| Part 2: Your NONPRIORITY Unsecured Claims - Contin | nuation Page | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| After listing any entries on this page, number them beginning | g with 4.5, followed by 4.6, and so forth. | Total claim |
| 4.10 IQ DATA INT Nonpriority Creditor's Name po bOX 3563 Number Street | Last 4 digits of account number 0115 When was the debt incurred? 11/1/2013 As of the date you file, the claim is: Check all that apply. | \$0.00 |
| EVERETT Washington 98213 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| JVDB ASC Nonpriority Creditor's Name PO Box 5718 Number Street Elgin Illinois 60121 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes | Last 4 digits of account number 2176 When was the debt incurred? 10/1/2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | \$0.00 |
| MERCHANTS CREDIT GUIDE Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 Number Street Chicago Illinois 60606 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number 6813 When was the debt incurred? 6/1/2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | \$0.00 |

Debtor 1 Dimari Case 16-08352 Doc 1 Filed 03/140/146 Entered 03/140/146 (Au4)42:00 Desc Main First Name Document Page 28 of 70

| Part 2: Your NONPRIORITY Unsecured Claims - Contin | nuation Page | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| After listing any entries on this page, number them beginning | g with 4.5, followed by 4.6, and so forth. | Total claim |
| MERCHANTS CREDIT GUIDE Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 Number Street | Last 4 digits of account number 6812 When was the debt incurred? 6/1/2013 As of the date you file, the claim is: Check all that apply. | \$0.00 |
| Chicago Illinois 60606 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| MERCHANTS CREDIT GUIDE Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 Number Street | Last 4 digits of account number | \$0.00 |
| MRSI Nonpriority Creditor's Name 2250 E DEVON AVE STE 352 Number Street DES PLAINES Illinois 60018 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number8837When was the debt incurred?5/1/2014As of the date you file, the claim is: Check all that applyContingentUnliquidatedDisputedStudent loansObligations arising out of a separation agreement or divorce that you did not report as priority claimsDebts to pension or profit-sharing plans, and other similar debtsOther. Specify | \$119.00 |

Debtor 1 Dimarie Case 16-08352 Doc 1 Filed 03/12-0/12-6 Entered 03/12-0/12-6 (12-4):42:00 Desc Main
First Name Docume 12 Page 29 of 70

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--|--|--|
| A.16 PRESTIGE FINANCIAL SVC Nonpriority Creditor's Name 1420 S 500 W Number Street | Last 4 digits of account number 5034 When was the debt incurred? 9/1/2007 As of the date you file, the claim is: Check all that apply. Contingent | \$7,407.00 | | | |
| SALT LAKE CITY Utah 84115 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | | | | |
| A.17 SPRINGLEAF FINANCIAL S Nonpriority Creditor's Name 3632 W 95th St Number Street Evergreen park Illinois 60805 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number 1292 When was the debt incurred? 6/1/2006 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | \$0.00 | | | |
| 4.18 STELLAR RECOVERY INC Nonpriority Creditor's Name 4500 Salisbury Rd Ste 10 Number Street | Last 4 digits of account number 3409 When was the debt incurred? 4/1/2015 As of the date you file, the claim is: Check all that apply. Contingent | \$350.00 | | | |
| Jacksonville Florida 32216 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | | | | |

Filed 03/120/126 Entered 03/120/126 (124:42:00 Desc Main Documeritime Page 30 of 70 Debtor 1 DimarieCase 16-08352 First Name Doc 1

| After listing any e | ntries on this page, n | umber them beginnin | ng with 4.5, followed by 4.6, and so forth. | Total claim |
|---------------------|-------------------------------------------------------------------|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| PO Box 1269 | Nonpriority Creditor's Name PO Box 1269 | | Last 4 digits of account number 9431 When was the debt incurred? 1/1/2013 As of the date you file, the claim is: Check all that apply. | <u>\$160.00</u> |
| | ebtor 2 only the debtors and another claim relates to a com | | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | |

Doc 1

Add the Amounts for Each Type of Unsecured Claim

Debtor 1 Page 31 of 70

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the 6c. Claims for death or personal injury while you were intoxicated 6c. \$0.00 6d. Other. Add all other priority unsecured claims. Write that \$0.00 amount here. 6e. Total. Add lines 6a through 6d. \$0.00 **Total claims** \$0.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or divorce 6g. that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that 6i. amount here. \$20,262.00 6j. Total. Add lines 6f through 6i. 6j.

Part 4:

| Fill in this informa | Case 16-0835 ation to identify your case | | 03/10/16 | Entered 03 | /10/16 14:42:00 | Desc Main |
|------------------------------------------|------------------------------------------|---------------------------------------------------|-------------------|----------------------|------------------------------------------------------|------------------------------------------------------------------|
| Debtor 1 | Dimarie First Name | Middle Name | Vazqu Last N | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last N | lame | | |
| United States Ba Case number (If known) | ankruptcy Court for the: | Northern | District of II | linois State) | | |
| , | Form 106G | | | | | Check if this is ar amended filing |
| Schedul | e G: Execut | ory Contracts | s and Un | expired L | eases | 12/15 |
| • | , copy the additional p | | | • | | ing correct information. If more onal pages, write your name and |
| | • | contracts or unexpirem with the court with your c | | ou have nothing else | to report on this form. | |
| Yes. Fill in | n all of the information be | elow even if the contracts of | leases are listed | on Schedule A/B: P | roperty (Official Form 106A | /B). |
| • | • | | | | what each contract or less of executory contracts an | ase is for (for example, rent, d unexpired leases. |
| Person | or company with whor | n you have the contract o | r lease | | State what the contrac | t or lease is for |
| | | | | | | |

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| De | btor 1 | Dimarie | | Vazquez | | |
| | | First Name | Middle Name | Last Name | | |
| | btor 2 oouse, if filing | First Name | Middle Name | Last Name | _ | |
| Un | ited States B | ankruptcy Court for the: | Northern | District of Illinois | | |
| | se number | | | (State) | | |
| | | | | | | Check if this is an amended filing |
| Oi | fficial F | Form 106H | | | | amended illing |
| | | e H: Your Co | odebtors | | | 12/1: |
| toge in th | ether, both a | are equally responsible the left. Attach the Add | for supplying correct infori | mation. If more space is nee | ded, copy the Additional Pag | If two married people are filing ge, fill it out, and number the entries case number (if known). Answer |
| 1. | Do you ha | ve any codebtors? (If yo | ou are filing a joint case, do no | t list either spouse as a codebt | or.) | |
| 2. | Louisiana, N | | ived in a community proper erto Rico, Texas, Washington, | • | unity property states and territor | ries include Arizona, California, Idaho, |
| | Yes. D | | oouse, or legal equivalent live | with you at the time? | | |
| | | | tate or territory did you live? | Fil | l in the name and current addres | ss of that person. |
| | | Name of your spouse, for | ormer spouse, or legal equival | ent | _ | |
| | | Number Street | | | _ | |
| | | City | State | Zip Code | _ | |
| 3. | as a codeb | otor only if that person i | s a guarantor or cosigner. I | Make sure you have listed th | | t the person shown in line 2 again fficial Form 106D), <i>Schedule E/F</i> olumn 2. |
| | Column 1: | Your codebtor | | | Column 2: The creditor to | whom you owe the debt |

Check all schedules that apply:

| Fill in th | is information to identify | your case: | | | 0/16 14 | :42:00 | Desc Ma | ain | |
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| Debtor 1 | Dimarie First Name | Middle Name | Vazquez Last Name | | | | | | |
| Debtor 2 | riiotriamo | Wildaio Harrio | Lastramo | | | Check if this | s is: | | |
| | f filing) First Name | Middle Name | Last Name | ! | | An ame | nded filing | | |
| I Inited Sta | ates Bankruptcy Court for the: | Northern | District of Illinois | | | | ement showing | | |
| Officed Sta | ates bankruptcy Court for the. | Notutent | (State | | | expense | es as of the folk | owing d | ate: |
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| Officia | al Form 106l | | | | | | | | |
| Sche | dule I: Your Inc | ome | | | | | | | 12 |
| espons nclude i nformat | ible for supplying corr information about you ion about your spouse vrite your name and ca | es possible. If two marrie rect information. If you a r spouse. If you are sep e. If more space is neede se number (if known). A nt | are married a arated and y ed, attach a s | and not filin our spous eparate sh | ng jointly, a e is not filin | nd your s g with yo | spouse is li ou, do not i | iving nclud | with you, le |
| 1. | Fill in your employment | | Debtor 1 | | | Debtor 2 | 2 | | |
| | information. | Employment status | | | | | | | |
| | If you have more than one | Employment status | ✓ Employed | | | Emplo | - | | |
| | job, | | Not Employ | red | | Not Er | nployed | | |
| | attach a separate page with information about additional employers. | Occupation | Dispatcher | | | | | | |
| | | Employer's name | Wow Internet & | Cable | | | | | |
| | Include part time, seasonal, | | | | | | | | |
| | or | Employer's address | PO Box 63000 Number Street | | | Number Str | eet | | |
| | self-employed work. | | | | | | | | |
| | Occupation may include | | | | | | | | |
| | student | | | | | | | | |
| | or homemaker, if it applies. | | Colorado | Colorado | 80962 | City | Sta | | Zip Code |
| | | | Springs City | State | Zip Code | City | 518 | ne . | Zip Code |
| | | How long employed there? | <i>C</i> , | Ciaio | p | | | | |
| Estimate | | Monthly Income | ave nothing to rep | ort for any line, | write \$0 in the s | space. Includ | e your non-filin | g spous | se unless you |
| are sepa | | | | | | | | | |
| , , | | re than one employer, combine th | ne information for | all employers fo | or that person on | the lines be | low. If you need | d more | space, attach |
| a sepaia | te sheet to this form. | | | For D | ebtor 1 | For Debt | or 2 or g spouse | | |
| | | y, and commissions (before all loulate what the monthly wage wo | | 2. | \$4,047.46 | | | | |
| 3. Est | imate and list monthly overt | ime pay. | 3 | 3. | + \$0.00 | | | _ | |
| 4. Cal | culate gross income. Add line | e 2 + line 3. | 4 | l | \$4,047.46 | | | | |
| | • | | | 1 ——— | | 1 | | - 1 | |

Debtor 1 Dimarie Case 16-08352 Filed 03/440/416 Entered @3/10/16 14:42:00 Desc Main Doc 1 Middle Name Documentame Page 35 of 70 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$4,047.46 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$379.02 5b. 5b. Mandatory contributions for retirement plans \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$311.20 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. -\$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$690.21 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$3,357.25 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 8a. monthly net income. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 8g. Pension or retirement income \$0.00 8g. 8h. Other monthly income. Specify: 8h. -\$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$0.00 10.Calculate monthly income. Add line 7 + line 9. \$3,357.25 \$3,357.25 10 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$3,357.25 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

| Fill in this inform | nation to identify yo | | 3/10/16 | J/10 14.42.00 | Desc Mai | 11 1 |
|---------------------------------------------|----------------------------------------------------------|--------------------------------------------------------------------------------------------------|-----------------------------------------------------|------------------------------------|-------------------------|--------------|
| Debtor 1 | Dimarie | | Vazquez | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing |) First Name | Middle Nome | Lost Name | Check if this is: | | |
| (Opouse, ii iiiiig | First Name | Middle Name | Last Name | An amended filin | g | |
| United States Ba | ankruptcy Court for | the: Northern | District of Illinois (State) | A supplement sh expenses as of the | • | • |
| Case number (If known) | | | | | | |
| (II KNOWN) | | | | MM / DD / YYYY | <u>/</u> | |
| Official F | Form 106 | J | | | | |
| | | Expenses | | | | 12/1 |
| nformation. If n | nore space is nee ver every question ribe Your Hou | | | | - | nber |
| ✓ No. Go | to line 2 | | | | | |
| Yes. Do | es Debtor 2 live | n a separate household? | | | | |
| | 1 No | | | | | |
| | - | 1. Cl. Official France 400 LO. France | | • | | |
| | | ust file Official Forms 106J-2, Expens | es for Separate Housenoid of Debtor I | 2. | | |
| 2. Do you have | • | No | | | | |
| Do not list De Debtor 2. | ebtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does deper with you? | ndent live |
| | | | Child | 19 years | No. | |
| | | | | | ✓ Yes. | |
| | | | Child | 17 years | No. | |
| | | | | | ✓ Yes. | |
| | | | Child | 6 years | No. | |
| | | | | | ✓ Yes. | |
| 3. Do your exp expenses of | enses include people other | ✓ No | | | | |
| than yourself and | vour | Yes | | | | |
| dependents | • | | | | | |
| D 40 E-45- | (- V 0 | alaa Maadhha Easana | | | | |
| Estimate your expenses as o applicable date | expenses as of y f a date after the e. | oing Monthly Expenses our bankruptcy filing date unless y bankruptcy is filed. If this is a supp | plemental Schedule J, check the b | | | • |
| | • | ided it on Schedule I: Your Income | | | Y | our expenses |
| 4. The rental of any rent for | | \$1,045.00 4. | | | | |
| If not inclu | ided in line 4: | | | | | |
| 4a. Real es | tate taxes | | | | 4a | \$0.00 |
| 4b. Property | y, homeowner's, o | renter's insurance | | | 4b. | \$0.00 |
| 4c. Home m | naintenance, repair | , and upkeep expenses | | | 4c. | \$0.00 |
| 4d. Homeo | wner's association | or condominium dues | | 4d. | \$0.00 | |

Debtor 1 DimarieCase 16-08352 Doc 1 Filed 03/140/146 Entered 03/14-0/146 (14-4):42:00 Desc Main

Document Page 37 of 70 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$135.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$300.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$850.00 7. 8. Childcare and children's education costs \$400.00 8. 9. Clothing, laundry, and dry cleaning \$150.00 9. 10. Personal care products and services \$50.00 10. 11. Medical and dental expenses \$25.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$150.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$60.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$170.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

| | <u>arieCase 16-08352</u> | Doc 1 | Filed 03/120/126 | <u>Entered</u> 03/410/1166/1144/42:0 | <u>0 E</u> | <u>Desc Main</u> | |
|-----------------|------------------------------------------------------------------------|-------------------|--------------------------|--------------------------------------|------------|------------------|------------|
| First I | Name M | liddle Name | Documetnt™e | Page 38 of 70 | | | |
| 21.Other. Spec | cify: | | | | 21 | | \$0.00 |
| | | | | | | | |
| 22. Calculate y | our monthly expenses. | | | | | | \$3,335.00 |
| 22a. Add lin | es 4 through 21. | | | | | | \$0.00 |
| 22b. Copy li | ne 22 (monthly expenses for De | ebtor 2), if any, | from Official Form 106J- | -2 | | | \$3,335.00 |
| 22c. Add lin | e 22a and 22b. The result is you | r monthly expe | enses. | | 22. | | |
| 23. Calculate y | our monthly net income. | | | | | | |
| 23a. Copy li | ne 12 (your combined monthly in | ncome) from S | Schedule I. | | 23a | | \$3,357.25 |
| 23b. Copy y | our monthly expenses from line 2 | 22 above. | | | 23b | _ | \$3,335.00 |
| | ct your monthly expenses from y | • | come. | | | | \$22.25 |
| The re | esult is your monthly net income. | | | | 23c | | |
| 24. Do you exp | pect an increase or decrease | in your expe | nses within the year aft | er you file this form? | | | |
| | ole, do you expect to finish paying payment to increase or decrease | | , , | | | | |
| ✓ No | | | | | | | |
| Yes | | | | | | | |
| | Explain here: | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| | Case 16-08352 | Doc 1 Filed 03 | 0/10/16 Entor | ed 03/10/16 14:42:00 | Doce Main |
|------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------------------|-------------------------------------------------------|-----------------------------------|
| Fill in this | information to identify your case: | | WINTE | -0.0371.0/10 14.42.00 | Desc Main |
| Debtor 1 | Dimarie | | Vazquez | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, | if filing) First Name | Middle Name | Last Name | | |
| United St | ates Bankruptcy Court for the: | Northern | District of Illinois | | |
| | , , | | (State) | | |
| Case nun (If known) | | | | | |
| Offici | al Form 106Dec | <u>)</u> | | | Check if this is a amended filing |
| Decla | aration About an | Individual Del | otor's Sched | dules | 12/1 |
| If two mar | rried people are filing together, | both are equally responsib | le for supplying correc | ct information. | |
| <u> </u> | Sign Below you pay or agree to pay someo | ne who is NOT an attorney | to help you fill out banl | kruptcy forms? | |
| ✓ | No | | | | |
| | Yes. Name of person | | _ Attach Bankruptc Signature (Officia | cy Petition Preparer's Notice, Decla al Form 119). | ration, and |
| that ✓ /s/ □ Signa | er penalty of perjury, I declare they are true and correct. Dimarie Vazquez ature of Debtor 1 3/10/2016 | that I have read the summar | × | with this declaration and ture of Debtor 2 | |
| | MM/DD/YYYY | | | MM/DD/YYYY | |

| | s information to id | 16-08352 dentify your case | | iled 03/10/16 | Enleren 0.3/ | 10/16 14:42:00 | Desc Main |
|----------------------|-----------------------------------------------------------------------|-------------------------------|-----------------------------------------|-------------------------------------------------------------------|---------------------------------------------------------------------|-----------------------------|---------------------------------------------------------------------------|
| Debtor 1 | Dimarie | 1 | | Vazq | | | |
| Debtor 2 | | | Middle Na | ame Last | Name | | |
| | , if filing) First Na | | Middle Na | | Name | | |
| | tates Bankruptcy | Court for the: | Northern | District of I | Illinois (State) | | |
| Case nu (If known | | | | | | | |
| Offic | ial Form | 107 | | | | | Check if this is a amended filing |
| | | | al Affairs | for Individu | uals Filing f | or Bankrupt | CY 12/1 |
| | needed, attach | a separate shee | et to this form. On t | | nal pages, write your | | ving correct information. If more er (if known). Answer every question |
| 1. V | Vhat is your cur | rent marital sta | tus? | | | | |
| | Married Not married | | | | | | |
| | uring the last 3 | years, have you | lived anywhere ot | her than where you li | ve now? | | |
| 2. D | | | | | | | |
| 2. D | No Yes. List all of Debtor 1: | the places you li | ed in the last 3 year | S. Do not include where | | | Dates Debtor 2 lived |
| 2. D | Yes. List all of | the places you liv | ved in the last 3 year | | d Debtor 2: | obtor 1 | there |
| 2. D | Yes. List all of Debtor 1: | the places you li | ved in the last 3 year | Dates Debtor 1 live | | ebtor 1 | |
| 2. D | Yes. List all of | | ved in the last 3 year | Dates Debtor 1 lived there From 9/1/2013 | d Debtor 2: | | there Same as Debtor 1 From |
| 2. D | Yes. List all of Debtor 1: 1700 Molitor Number Stre | et | | Dates Debtor 1 lived there | Debtor 2: Same as D | | there Same as Debtor 1 |
| 2. D | Yes. List all of Debtor 1: 1700 Molitor | | ved in the last 3 year 60505 Zip Code | Dates Debtor 1 lived there From 9/1/2013 | Debtor 2: Same as D | | there Same as Debtor 1 From To |
| 2. D | Yes. List all of Debtor 1: 1700 Molitor Number Stree Aurora | et Illinois | 60505 | Dates Debtor 1 lived there From 9/1/2013 | Debtor 2: Same as D Number Street | : State Zip C | there Same as Debtor 1 From To |
| 2. D | Yes. List all of Debtor 1: 1700 Molitor Number Stree Aurora | et Illinois State | 60505 | Dates Debtor 1 lived there From 9/1/2013 | Debtor 2: Same as D Number Street | : State Zip C ebtor 1 | there Same as Debtor 1 From To |
| 2. D | Yes. List all of Debtor 1: 1700 Molitor Number Stree Aurora City | et Illinois State | 60505 | Dates Debtor 1 liver there From 9/1/2013 To 9/1/2015 | Debtor 2: Same as Debtor 2: Number Street City Same as Debtor 2: | : State Zip C ebtor 1 | there Same as Debtor 1 From To Sode Same as Debtor 1 |

Debtor 1 DimarieCase 16-08352 First Name

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 Doc 1

| t 2: Explain the Sources of Your Inc | come | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Fill in the total amount of income you received | from all jobs and all businesses | , including part-time | | |
| No ✓ Yes. Fill in the details. | | | | |
| | Debtor 1 | | Debtor 2 | |
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips☐ Operating a business | \$10434.00 | Wages, commissions, bonuses, tips Operating a business | |
| For last calendar year: (January 1 to December 31, | ✓ Wages, commissions, bonuses, tips Operating a business | \$53888.00 | Wages, commissions, bonuses, tips Operating a business | |
| For the calendar year before that: (January 1 to December 31, 2014) YYYY | ✓ Wages, commissions, bonuses, tips✓ Operating a business | \$48039.00 | Wages, commissions, bonuses, tips Operating a business | |
| Include income regardless of whether that incombenefit payments; pensions; rental income; inter and you have income that you received together. | ne is taxable. Examples of other test; dividends; money collected , list it only once under Debtor 1. | income are alimony; child s from lawsuits; royalties; and | d gambling and lottery winnings. | |
| | Debtor 1 | | Debtor 2 | |
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | | | | |
| For last calendar year: (January 1 to December 31, 2015) YYYY | | | | |
| For the calendar year before that: (January 1 to December 31, | | | | |
| | Did you have any income from employment Fill in the total amount of income you received activities. If you are filing a joint case and you have any income from employment activities. If you are filing a joint case and you have activities. If you are filing a joint case and you have activities. If you are filing a joint case and you have income from each activities. From January 1 of current year until the date you filed for bankruptcy: For the calendar year before that: (January 1 to December 31, 2014) YYYYY Did you receive any other income during this include income regardless of whether that income benefit payments; pensions; rental income; internand you have income that you received together. List each source and the gross income from each you have income and the gross income from each year. No No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2015) YYYYY For the calendar year before that: (January 1 to December 31, 2014) | Fill in the total amount of income you received from all jobs and all businesses activities. If you are filing a joint case and you have income that you receive tog No Yes. Fill in the details. Debtor 1 | Did you have any income from employment or from operating a business during this year or the Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under activities. If you are filing a joint case and you have income that you receive together, list it only once under No Yes. Fill in the details. Debtor 1 | Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 |

Debtor 1 DimarieCase 16-08352 First Name Filed 03/120/46 Entered 03/410/116 /144:42:00 Desc Main Doc 1 Document Page 42 of 70 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

| Are either Debtor 1's or Debtor 2's debts primarily consumer debts? | | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------|-----------------------------|--------------------------------------------------------------|--------------------------------|-------------------------------|--|--|--|--|--|
| | | tor 2 has primarily usehold purpose." | consumer debts. Con | sumer debts are defined in | 11 U.S.C. § 101(8) as "incurre | ed by an individual primarily | | | | | |
| During the 9 | 0 days before y | ou filed for bankruptc | y, did you pay any credit | or a total of \$6,225* or more | ? | | | | | | |
| No. Go | to line 7. | | | | | | | | | | |
| Yes. Li | ist below each o | | | more in one or more paym | | | | | | | |
| total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | | | | | | | | | | | |
| * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. | | | | | | | | | | | |
| Yes. Debtor 1 or | Debtor 2 or b | oth have primarily | consumer debts. | | | | | | | | |
| Durina the 9 | 0 davs before v | ou filed for bankruptc | v. did vou pav anv credit | or a total of \$600 or more? | | | | | | | |
| _ | to line 7. | | ,, , | | | | | | | | |
| = | | | :-l - +-+-l{ | | | | | | | | |
| | | | | ore and the total amount you bligations, such as child su | | | | | | | |
| | | | s to an attorney for this b | • | | | | | | | |
| | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for | | | | | |
| Creditor's Name | <u> </u> | | | _ | | - Mortgage | | | | | |
| | | | _ | | | Car | | | | | |
| Number Street | t | | | | | Credit card Loan repayment | | | | | |
| | | | = | | | Suppliers or | | | | | |
| City | State | Zip Code | _ | | | vendors | | | | | |
| | | | | | | Other | | | | | |
| Creditor's Name |) | | - | | | Mortgage | | | | | |
| Number Street | <u> </u> | | - | | | Car Credit card | | | | | |
| | | | - | | | Loan repayment | | | | | |
| - | | | _ | | | Suppliers or | | | | | |
| City | State | Zip Code | | | | vendors Other | | | | | |
| | | | _ | | | - Mortgage | | | | | |
| Creditor's Name | e | | | | | Car | | | | | |
| Number Street | t | | - | | | Credit card | | | | | |
| - | | | - | | | Loan repayment | | | | | |
| City | State | Zip Code | - | | | Suppliers or vendors | | | | | |
| J., | | p | | | | Other | | | | | |

Dimarie Case 16-08352 Doc 1 Filed 03/120/26 Entered 03/120/126 / Desc Main Debtor 1 Document Page 43 of 70 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 DimarieCase 16-08352 First Name Filed 03/140/146 Entered 03/140/146 (14442:00 Desc Main Doc 1

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| outes. | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------|-------------------------------------------------------------|------------------|----------|-------------------------------------|
| No | | | | | | |
| Yes. Fill in the details. | Nature o | of the case | Court or | agency | | Status of the case |
| Case title | | | | | | Pending |
| Construction | | | Court Nar | me | | On appeal |
| Case number | | | Number S | Street | | Concluded |
| | | | City | State | Zip Code | _ |
| Case title | | | Court No. | | | Pending |
| Case number | | | Court Nar | | | On appeal Concluded |
| | | | Number S | Street | | Concided |
| | | | City | State | Zip Code | |
| neck all that apply and fill in the o | letails below. | of your property re | | eclosed, garnish | Date | Value of the |
| heck all that apply and fill in the one of the control of the cont | letails below. | | | eclosed, garnish | | |
| heck all that apply and fill in the o | letails below. | | operty | eclosed, garnish | | Value of the |
| heck all that apply and fill in the one of the control of the cont | letails below. | Describe the pro | ppened | eclosed, garnish | | Value of the |
| No. Go to line 11. Yes. Fill in the information be Creditor's Name | letails below. | Describe the pro | ppened repossessed. | eclosed, garnish | | Value of the |
| No. Go to line 11. Yes. Fill in the information be Creditor's Name | letails below. | Explain what ha | ppened repossessed. foreclosed. garnished. | | | Value of the |
| No. Go to line 11. Yes. Fill in the information be Creditor's Name | letails below. | Explain what ha | ppened repossessed. foreclosed. garnished. attached, seized | | Date | Value of the property |
| No. Go to line 11. Yes. Fill in the information be Creditor's Name Number Street | details below. | Explain what ha | ppened repossessed. foreclosed. garnished. attached, seized | | | Value of the |
| No. Go to line 11. Yes. Fill in the information be Creditor's Name Number Street City State | details below. | Explain what ha | ppened repossessed. foreclosed. garnished. attached, seized | | Date | Value of the property Value of the |
| No. Go to line 11. Yes. Fill in the information be Creditor's Name Number Street | details below. | Describe the pro | ppened repossessed. foreclosed. garnished. attached, seized | | Date | Value of the property Value of the |
| No. Go to line 11. Yes. Fill in the information be Creditor's Name Number Street City State | details below. | Explain what ha | ppened repossessed. foreclosed. garnished. attached, seized | | Date | Value of the property Value of the |

| Deb | tor 1 | | <u>d 03/120/126 Entered 03/110/116 /1444</u> 2: cumenter Page 45 of 70 | 00 Desc | <u>Main</u> |
|------|----------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|--------------------------|-------------------------|
| 11. | | | creditor, including a bank or financial institution, set of | ff any amounts fr | om your |
| | | No Yes. Fill in the details. | | | |
| | | | Describe the action the creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | |
| | | Number Street | Last 4 digits of account number: XXXX- | | |
| | | City State Zip Code | | | |
| 12. | | in 1 year before you filed for bankruptcy, was any of iver, a custodian, or another official? | your property in the possession of an assignee for th | e benefit of credi | tors, a court-appointed |
| | ✓ | No Yes | | | |
| Part | | List Certain Gifts and Contributions | | | |
| 13. | Wi | thin 2 years before you filed for bankruptcy, did you go No Yes. Fill in the details for each gift. | give any gifts with a total value of more than \$600 per | person? | |
| | | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | Person to Whom You Gave the Gift | | | |
| | | Number Street | | | |
| | | City State Zip Code Person's relationship to you | | | |
| | | Person to Whom You Gave the Gift | | | |
| | | Number Street | | | |
| | | City State Zip Code Person's relationship to you | | | |
| | | <u> </u> | | 1 | |

| | | FIRST Name | IVIIddie Name DO | ocument Page 46 of 70 | | |
|------|----------|-----------------------------------------------------------------------|----------------------|------------------------------------------------------------------------------------------------------------------------|-----------------------------------|------------------------|
| 14. | With | nin 2 years before you filed for b | | give any gifts or contributions with a total value of mor | e than \$600 to an | y charity? |
| | ✓ | No Yes. Fill in the details for each gift | or contribution. | | | |
| | _ | Gifts with a total value of more per person | | Describe the gifts | Dates you gave the gifts | Value |
| | | Charity's Name | | | | |
| | | | | | | |
| | | Number Street | | | | |
| | | City State | Zip Code | | | |
| Part | | List Certain Losses | nkruntev or since v | ou filed for bankruptey did you lose anything because | of thatt fire athe | r disastor or |
| 15. | | bling? | nkruptcy or since yo | ou filed for bankruptcy, did you lose anything because o | or thert, fire, othe | r disaster, or |
| | | No Yes. Fill in the details. | | | | |
| | | Describe the property you lost how the loss occurred | and | Describe any insurance coverage for the loss | Date of your loss | Value of property lost |
| | | | | Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i> | | |
| | | | | | | |
| Part | 7: | List Certain Payments or 1 | Transfers | | | |
| 16. | | iin 1 year before you filed for ba ing bankruptcy or preparing a b | | anyone else acting on your behalf pay or transfer any p | property to anyor | e you consulted about |
| | | | | t counseling agencies for services required in your bankrupto | cy. | |
| | | No Yes. Fill in the details. | | | | |
| | _ | | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | | Ingram, Brent Person Who Was Paid | | Semrad Law Firm - \$0.00 | 3/10/2016 | \$0.00 |
| | | Number Street | | | | |
| | | Number Street | | | | |
| | | City State | Zip Code | | | |
| | | Email or website address | · | | | |
| | | Person Who Made the Payment, if | f Not You | | | |
| | | Person Who Was Paid | | | | |
| | | Number Street | | | | |
| | | | | | | |
| | | City State | Zip Code | | | |
| | | Email or website address | | | | |
| | | Person Who Made the Payment, if | f Not You | | | |

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| | No Yes. Fill in the details. | | | | | | |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------------------------------------|-----------------------|-----------------------------------|-----------|------------------------|
| | | | Description and value of any prop | erty transferred | Date payment or transfer was made | Amou | nt of paymer |
| | Person Who Was Paid | | - | | | | |
| | Number Street | | - - | | | | |
| | City State | Zip Code | - | | | | |
| Inc | dinary course of your business or fillude both outright transfers and transfers from the steed on the last of the | ers made as secur | ity (such as the granting of a security inte | erest or mortgage on | your property). Do | not incli | ude gifts and |
| | | | Description and value of any property transferred | | property or paymebts paid in exch | | Date trans was made |
| | Person Who Received Transfer | | - | | | | |
| | Number Street | | - | | | | |
| | City State Person's relationship to you | Zip Code | - | | | | |
| | Person Who Received Transfer | | - | | | | |
| | Number Street | | - | | | | |
| | City State Person's relationship to you | Zip Code | _ | | | | |
| | nese are often called asset-protection of No | | u transfer any property to a self-settle | d trust or similar de | evice of which yo | u are a l | beneficiary? |
| | | | Description and value of the prop | erty transferred | | | Date trans |
| (Tr | Yes. Fill in the details. | | zoon phonomana value et alle prop | , | | | was made |

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Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

| 20. | or transferred? Include checking, savings, money market, or other financia cooperatives, associations, and other financial institutions. | | | | | | | | | |
|-----|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|----------|------------------|-------------------------|----------|-----------------|----------------------------|---------------------------------------------------------------|-----------------------------------------------|
| | | No Yes. Fill in the details. | | | | | | | | |
| | | | | Last 4 number | digits of account er | | Type of instrum | account or ent | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | | Person Who Was Paid | | XXXX- | | | | ecking ings | | |
| | | Number Street | | | | | _ | ney market kerage er | | |
| | | City State | Zip Code | | | | | | | |
| | | Person Who Was Paid | | XXXX- | | | = | cking ings | | |
| | | Number Street | | | | | Mor | ney market kerage | | |
| | | City State | Zip Code | • | | | _ | | | |
| | valu | vou now have, or did you have ables? No Yes. Fill in the details. | | | had access to it? | | | Describe the contents | | Do you still have it? |
| | | Name of Financial Institution | Na | ame | | | | | | ☐ No |
| | | Number Street | Nu | ımber | Street | | | | | Yes |
| | | City State | Zip Code | ty | State | Zip C | ode | | | |
| 22. | Have | e you stored property in a sto | · | er than y | your home within | 1 year k | oefore y | ou filed for bankruptcy | ? | |
| | | No Yes. Fill in the details. | | | | | | | | |
| | _ | | w | ho else | had access to it? | | | Describe the contents | 3 | Do you still have it? |
| | | Name of Storage Facility | Na | ame | | | | | | ☐ No ☐ Yes |
| | | Number Street | Nu | ımber | Street | | | | | |
| | | Oit. | Cit | ty | State | Zip C | ode | | | |
| | | City State | Zip Code | | | | | | | |

| Deb | tor 1 | First Name Middle Name | Filed 03/ Docum | ënt™ Pa(| ntered @3/4 ge 49 of 70 | .r0 √1⊾6 ⁄1⊾4√42: <u>00 </u> | n |
|------|----------|------------------------------------------------------------------------------------------------------------------|--------------------|--------------------|----------------------------|-----------------------------------------------------------------------|------------------|
| Part | 9: | dentify Property You Hold or Contro | I for Some | one Else | | | |
| 23. | Doy | ou hold or control any property that someone | e else owns? I | nclude any pro | perty you borro | owed from, are storing for, or hold in tru | ust for someone. |
| | | No | | | | | |
| | Ш | Yes. Fill in the details. | Where is th | ne property? | | Describe the contents | Value |
| | | | Wilere is th | ic property. | | Describe the contents | Value |
| | | Owner's Name | Number Str | eet | | _ | |
| | | Number Street | _ | | | _ | |
| | | | _ | | | _ | |
| | | | City | State | Zip Code | | |
| | | City State Zip Code | _ | | | | |
| Par | 10: | Give Details About Environmental In | formation | | | | |
| For | the p | urpose of Part 10, the following definitions apply: | | | | | |
| | ■ E | nvironmental law means any federal, state, or loca | l statute or regu | ılation concernin | g pollution, conta | mination, releases of | |
| | ha | azardous or toxic substances, wastes, or material in | nto the air, land | , soil, surface wa | ater, groundwater | | |
| | | cluding statutes or regulations controlling the clear | | | | CP - 2 | |
| | | ite means any location, facility, or property as define used to own, operate, or utilize it, including dispo- | • | vironmentai iaw, | wnetner you now | own, operate, or utilize it | |
| | ■ H | azardous material means anything an environment | al law defines a | ıs a hazardous w | aste, hazardous s | substance, | |
| | to | xic substance, hazardous material, pollutant, conta | aminant, or sim | ilar term. | | | |
| Rep | oort al | notices, releases, and proceedings that you know | about, regardle | ess of when they | occurred. | | |
| 24 | Hae | any governmental unit notified you that you r | may he liahle (| or notentially lis | able under or in | violation of an environmental law? | |
| | | | nay 50 nabio | or potoritiany in | | violation of all official and | |
| | Ħ | No Yes. Fill in the details. | | | | | |
| | _ | | Governme | ntal unit | | Environmental law, if you know it | Date of notice |
| | | Name of site | | al it | | _ | |
| | | Name of site | Government | ai unit | | _ | |
| | | Number Street | Number Str | eet | | | |
| | | | City | State | Zip Code | _ | |
| | | 011 71 01 1 | _ | | · | | |
| | | City State Zip Code | | | | | |
| 25. | Hav | e you notified any governmental unit of any re | elease of haza | rdous material | ? | | |
| | V | No | | | | | |
| | | Yes. Fill in the details. | | | | | |
| | | | Governme | ntal unit | | Environmental law, if you know it | Date of notice |
| | | Name of site | Government | al unit | | _ | |
| | | Number Street | Number Str | eet | | _ | |
| | | TOTAL STREET | rannoci oli | | | | |
| | | | City | State | Zip Code | _ | |
| | | City State Zip Code | _ | | | | |
| | | • | | | | | |

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|------|----------|-------------------------------------------------------------------------|---------------------|---------------------------|--------------------------------|------------------------|-----------------------------------------------------------|
| 26. | Hav | e you been a party in any judici | al or administrat | ive proceeding under | any environmental law | ? Include settlements | and orders. |
| | V | No | | | | | |
| | | Yes. Fill in the details. | | | | | |
| | | | | Court or agency | | Nature of the case | Status of the case |
| | | Coop title | | | | | □ Danding |
| | | Case title | | Court Name | | | Pending |
| | | | | Number Street | | | On appeal |
| | | - | | | | | Concluded |
| | | Case number | | City Stat | ie Zip Code | | |
| Part | 11: | Give Details About Your | Business or (| Connections to A | ny Business | | |
| 27. | Witl | hin 4 years before you filed for I | bankruptcy, did y | ou own a business o | r have any of the follow | ing connections to an | y business? |
| | | A sole proprietor or self-emp | loved in a trade, p | rofession, or other activ | ity either full-time or part | -time | |
| | | A member of a limited liability | | • | • | | |
| | | A partner in a partnership | | | | | |
| | | An officer, director, or managed An owner of at least 5% of the | _ | | on | | |
| | | _ | | occurries of a corporati | OH | | |
| | 씜 | No. None of the above applies. Go Yes. Check all that apply above ar | | below for each busines | S. | | |
| | _ | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | ature of the business | | entification number Do not al Security number or ITIN. |
| | | Business Name | | | | EIN: | |
| | | Dusiness Name | | | | | |
| | | Number Street | | Name of accou | ntant or bookkeeper | Dates busine | ess existed |
| | | City State | Zip Code | | <u> </u> | From | То |
| | | , | —р | | | | |
| | | | | | | | |
| | | | | Describe the na | ature of the business | | entification number Do not all Security number or ITIN. |
| | | Business Name | | | | EIN: | |
| | | N | | | | Dates busine | and existed |
| | | Number Street | | Name of accou | ntant or bookkeeper | Dates busine | 355 existed |
| | | City State | Zip Code | | | From | To |
| | | | | | | | |
| | | | | Describe the na | ature of the business | Employer Id | entification number Do not |
| | | | | bescribe the ne | ature of the business | | al Security number or ITIN. |
| | | Business Name | | | | EIN: | |
| | | | | | | _ | |
| | | Number Street | | Name of accou | ntant or bookkeeper | Dates busine | existed |
| | | City State | Zip Code | | | From | To |
| | | | | | | | |
| | | | | | | | |

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|--------------|------------------------------------------------|-------------------------------------------------------------------|-----------------------------|--------------------------|---------------------------------------------------------------------------------------------|------------------------------------|
| | First Name | | Middle Name | Documetnit ^{me} | Page 51 of 70 | |
| | hin 2 years before ditors, or other par | • | oankruptcy, did y | ou give a financial st | atement to anyone about your business? In | nclude all financial institutions, |
| V | No Yes. Fill in the deta | ils halow | | | | |
| Ь | res. I ill ill the deta | iio bolow. | | Date issued | | |
| | Name | | | MM/DD/YYYY | | |
| | Number Street | | | | | |
| | City | State | Zip Code | | | |
| Part 12: | Sign Below | | | | | |
| and o | correct. I understa | nd that makin | | | achments, and I declare under penalty of pe erty, or obtaining money or property by frau | |
| | · · | Dimarie Vazqu | | imprisonment for up | to 20 years, or both. 18 U.S.C. §§ 152, 1341, | 1519, and 3571. |
| | x | | uez | imprisonment for up | | 1519, and 3571. |
| | ¥ <u>/s/</u> Signa | Dimarie Vazqu | uez | r imprisonment for up | * | 1519, and 3571. |
| | ★ /s/ Signar Date | Dimarie Vazqu ture of Debtor 1 3/10/2016 | uez I | | Signature of Debtor 2 | |
| Did y | ★ /s/ Signar Date | Dimarie Vazqu ture of Debtor 1 3/10/2016 | uez I | | Signature of Debtor 2 Date | |
| Did y ☑ ¹ | Signar Date rou attach addition | Dimarie Vazqu ture of Debtor 1 3/10/2016 | uez I | | Signature of Debtor 2 Date | |
| Did y | /s/ Signal Date You attach addition No Yes | Dimarie Vazqu ture of Debtor 1 3/10/2016 nal pages to Y | uez I our Statement o | of Financial Affairs for | Signature of Debtor 2 Date | |
| Did y | /s/ Signal Date You attach addition No Yes | Dimarie Vazqu ture of Debtor of 3/10/2016 nal pages to Y | uez I our Statement o | of Financial Affairs for | Signature of Debtor 2 Date Individuals Filing for Bankruptcy (Official | Form 107)? |

| | Case 16-0835 | 2 Doc 1 Filed | 03/10/16 E | Entered 03/10/16 14:42:00 | Desc Main |
|--------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| Fill in this information | ation to identify your case | | | 0/10 14.42.00 | Desc Main |
| Debtor 1 | Dimarie | | Vazquez | | |
| | First Name | Middle Name | Last Name | е | |
| Debtor 2 | · | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | е | |
| United States Ba | ankruptcy Court for the: | Northern | District of Illinoi | s | |
| | | | (State | e) | |
| Case number | | | | | |
| (If known) | | | | | |
| Official F | orm 108 | | | | Check if this is an amended filing |
| Stateme | nt of Intenti | on for Individ | uals Filing | g Under Chapter 7 | 12/15 |
| ■ creditors hav ■ you have leas You must file thi whichever is ear If two married pe | e claims secured by you sed personal property a s form with the court w lier, unless the court e | and the lease has not expir within 30 days after you file extends the time for cause. er in a joint case, both are o | red. e your bankruptcy You must also ser | petition or by the date set for the mee nd copies to the creditors and lessors e for supplying correct information. | |
| Re as complete | and accurate as nessil | bla. If more space is peeds | d attach a conara | to sheet to this form. On the ton of any | additional pages |

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

| Par | Part 1: List Your Creditors Who Have Secured Claims | | | | | | |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|--|--|--|--|
| 1. | For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D below. | | | | | | |
| | Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? | | | | |
| | Creditor's name: Tri State Financial Description of property securing debt: Chevy, Impala Value: \$1,500.00 | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. ✓ Yes. | | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | | | |

| Debtor 1 | Case 16-08352 First Name | 2 Doc 1 Middle Nai | Filed 03/10/16 Document me Last Nar | Entered 03/10/16 14 Page 53 of 70 ne | 4:42:00 (if | Desc Main |
|-----------------|--------------------------------------------------------------------|---------------------------------|--------------------------------------------------------|---------------------------------------------------------------------------------------------|----------------|------------------------------|
| For any informa | | lease that you late leases. Une | listed in Schedule G: Exe expired leases are leases | ecutory Contracts and Unexpired that are still in effect; the lease p C. § 365(p)(2). | | |
| Des | scribe your unexpired persona | l property lease | es | | Will the lea | se be assumed? |
| Les | sor's name: | | | | No Yes | |
| | scription of leased perty: | | | | _ | |
| Les | sor's name: | | | | No Yes | |
| | scription of leased perty: | | | | _ | |
| Les | sor's name: | | | | ☐ No☐ Yes | |
| | scription of leased perty: | | | | | |
| Les | sor's name: | | | | ☐ No☐ Yes | |
| | scription of leased perty: | | | | | |
| Les | sor's name: | | | | ☐ No☐ Yes | |
| | scription of leased perty: | | | | | |
| Les | sor's name: | | | | ☐ No☐ Yes | |
| | scription of leased perty: | | | | | |
| Les | sor's name: | | | | ☐ No☐ Yes | |
| | scription of leased perty: | | | | _ | |
| Part 3: | Sign Below | | | | | |
| | er penalty of perjury, I declare is subject to an unexpired lea | | cated my intention abou | t any property of my estate that s | secures a de | ot and any personal property |

/s/ Dimarie Vazquez
Signature of Debtor 1

Date 3/10/2016 MM/DD/YYYY Signature of Debtor 1

Date MM/DD/YYYY

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| re | Dimarie Vazquez | | Case No. | |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------|--------------------------------|
| | Debtor | | | (If known) |
| | | | Chapter | Chapter 7 |
| | | COMPENSATION OF A | | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. year before the filing of the petition in bankruptcy, of in connection with the bankruptcy case is as follow | r agreed to be paid to me, for services ren | | |
| | For legal services, I have agreed to accept | | | \$1,400.00 |
| | Prior to the filing of this statement I have received | | | \$0.00 |
| | Balance Due | | | \$1,400.00 |
| 2. | The source of the compensation paid to me was: Debtor | Other (specify) | | |
| 3. | The source of the compensation paid to me is: Debtor | Other (specify) | | |
| 4. | I have not agreed to share the above-disclose members and associates of my law firm. | d compensation with any other person unl | ess they are | |
| | I have agreed to share the above-disclosed of members or associates of my law firm. A cop the people sharing in the compensation, is at | of the agreement, together with a list of the | | |
| 5. | In return for the above-disclosed fee, I have agree a. Analysis of the debtor's financial situation | | | in bankruptcy; |
| | b. Preparation and filing of any petition, sch | edules, statements of affairs and plan whic | ch may be required; | |
| | c. Representation of the debtor at the meet | ng of creditors and confirmation hearing, a | and any adjourned hearings there | of; |
| 6. | . By agreement with the debtor(s), the above-disclo | sed fee does not include the following serv | rices: | |
| | | | | |
| | | CERTIFICATION | | |
| | I certify that the foregoing is a complete statement of eedings. | any agreement or arrangement for payme | ent to me for representation of the | e debtor(s) in this bankruptcy |
| | 3/10/2016 | | /s/ Brent Ingram | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$310 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$235 | filing fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-08352 Doc 1 Filed 03/10/16 Entered 03/10/16 14:42:00 Desc Main UNITED STATES BANKBURGO OF POURT Northern District of Illinois

| In re: | Vazquez, Dimarie | Case No | | | | | |
|--------|----------------------------------------------------------------------------------------------------------------------|----------------------|----------|--|--|--|--|
| | Debtor(s) | | | | | | |
| | | Chapter. | Chapter7 | | | | |
| | | | | | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | | |
| | The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their l | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Date: | 3/10/2016 | /s/ Vazquez, Dimarie | | | | | |
| | | Vazguez, Dimarie | | | | | |

Signature of Debtor

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ADVANCED COLLECTION BU Po Box 560063 Rockledge , FL 32956

PRESTIGE FINANCIAL SVC 1420 S 500 W SALT LAKE CITY, UT 84115

I C SYSTEM INC PO BOX 64378 SAINT PAUL , MN 55164

AD ASTRA RECOVERY SERV 7330 W 33RD ST N STE 118 WICHITA , KS 67205

CACH, LLC 4340 South Monaco St 2nd FL Attention: Bankruptcy Denver , CO 80237

STELLAR RECOVERY INC 4500 Salisbury Rd Ste 10 Jacksonville , FL 32216

DSG COLLECT 2250 E Devon # 352 Des Plaines , IL 60018

DSG COLLECT 2250 E Devon # 352 Des Plaines , IL 60018

TEK COLLECT PO Box 1269 Columbus , OH 43216

MRSI 2250 E DEVON AVE STE 352 DES PLAINES , IL 60018

ATG CREDIT 1700 W CORTLAND ST STE 2 CHICAGO , IL 60622

JVDB ASC PO Box 5718 Elgin , IL 60121

CITIFINANCIAL 104-Q CARRBORO PLAZA CARRBORO , NC 27510

SPRINGLEAF FINANCIAL S 3632 W 95th St Attn: Bankruptcy Dept. Evergreen park , IL 60805

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606 Case 16-08352 Doc 1 Filed 03/10/16 Entered 03/10/16 14:42:00 Desc Main Document Page 61 of 70 Page 81 of 70

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606

BERKS CC P.O. BOX 2171 SINKING SPRING , PA 19608

Tri State Financial P.O. Box 2520 Wilkes Barre , PA 18703

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1400 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filling of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filling of my case. I have been advised that I have a right to consult other counsel before I sign

Initial:

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

| Date: 3/10/2016 | |
|-----------------|--------|
| Client | Client |
| Attorney // | |

| | Case 16-08352 ation to identify your case | Doc 1 Filed 03 | | ed 03/10/16 14:42:00 | Desc Main |
|-------------------------------------|-----------------------------------------------------------|---------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------------------------|----------------------------------------------------------------------------|
| Debtor 1 | Dimarie | Docum | | 04 OT /U | |
| Deplor I | First Name | Middle Name | Vazquez Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Ba | inkruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case number | ¥ | | | | |
| | orm 106De | <u>C</u> | | | Check if this is an amended filing |
| Declarati | ion About ai | n Individual Del | otor's Sche | dules | 12/15 |
| If two married pe | eople are filing togethe | r, both are equally responsib | le for supplying cor | rect information. | |
| property by frau 1519, and 3571. | s form whenever you fi d in connection with a Below | le bankruptcy schedules or a bankruptcy case can result in | amended schedules. n fines up to \$250,00 | Making a false statement, concea), or imprisonment for up to 20 yea | ling property, or obtaining money or ars, or both. 18 U.S.C. §§ 152, 1341, |
| Did you pa | y or agree to pay some | one who is NOT an attorney | to help you fill out b | ankruptcy forms? | |
| ✓ No | | | | | |
| Yes. N | ame of person | | _ Attach Bankruj Signature (Offi | otcy Petition Preparer's Notice, Decla cial Form 119). | ration, and |
| | ¥ | | | | |
| | ve true and correct. | that I have read the summar | × | d with this declaration and | |
| Date 3/10/2 MM/E | DD/YYYY | | Dat | e MM/DD/YYYY | |

Dimari€ase 16-08352 Doc 1 Filed 03/149/146 __Entered_03/10/11/6 11/4:4/2:00 __Desc_Main Debtor 1 Document Page 65 of 70 I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about For your attorney, if eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the you are represented by relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify If you are not that I have no knowledge after an inquiry that the information in the schedules filed with the petition is represented by an incorrect. attorney, you do not X need to file this page. 3/10/2016 /s/ Brent Ingram Date Signature of Attorney To Deptor MM / DD / YYYY Brent Ingram Printed name Semrad Law Firm Firm name Street Number

State

Zip Code

Email address

State

City

Contact phone

Bar number

| Debtor 1 Dimari€ase 16-0 First Name | | d 03/40/426 ocument F | Entered 03/10/16 | T4:42:00— | Desc Main- |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| Part 6: Answer These Qu | estions for Reporting P | rposes | Page 66 of 70 | | |
| 16. What kind of debts do you have? 17. Are you filing under Chapter 7? | No. Go to line Yes. Go to line 16b. Are your debts pri obtain money for a investment. No. Go to line Yes. Go to line 16c. State the type of de | ndividual primar 6b. 17. marily busines business or inve 6c. 17. ebts you owe that Chapter 7. Go to line | s debts? Business dependent or through the lat are not consumer de | bts are debts the operation of the ebts or business | at you incurred to e business or |
| Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | paid that funds will b ✓ No. ✓ Yes. | e available to distrib | ute to unsecured creditors? | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | | 1,000-5,000 5,001-10,000 10,001-25,000 | ☐ 50 ☐ M | 5,001-50,000 0,001-100,000 ore than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 millior \$50,000,001-\$100 millio \$100,000,001-\$500 mill | n | 500,000,001-\$1 billion 1,000,000,001-\$10 billion 10,000,000,001-\$50 billion lore than \$50 billion |
| 20. How much do you estimate your liabilities to be? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 millior \$50,000,001-\$100 millio \$100,000,001-\$500 mill | n | 500,000,001-\$1 billion 1,000,000,001-\$10 billion 10,000,000,001-\$50 billion lore than \$50 billion |
| Part 7: Sign Below | | المعام المعا | are under penalty of pe | orium that the in | oformation provided is true |
| For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | |
| | | 0/2016 MM / DD / YYYY | | gnature of Debtor 2 secuted on | MM / DD / YYYY |

| Debtor 1 | CUBC TO OUDDE | Doc 1 Filed 03/19/16 Last Name Document | Entered 03/10/16 14:42:00 Desc Main Page 67 of 70 | |
|----------|-------------------------------------------------------------------------|----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| | thin 2 years before you filed for bar ditors, or other parties. | nkruptcy, did you give a financial st | atement to anyone about your business? Include all financial institutions, | |
| | No Yes. Fill in the details below. | | | |
| | | Date issued | | |
| | Name | MM/DD/YYYY | | |
| | Number Street | | | |
| | City State | Zip Code | | |
| and | correct. I understand that making cruptcy case can result in fines up t | a false statement, concealing prop to \$250,000, or imprisonment for up | achments, and I declare under penalty of perjury that the answers are true erty, or obtaining money or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | |
| | /s/ Dimarie vazque. | | | |
| | Signature of Debtor 1 | 2 | Signature of Debtor 2 | |
| | Signature of Debtor 1 Date 3/10/2016 | | Signature of Debtor 2 Date | |
| Did | Date 3/10/2016 | | en m | |
| V | Date 3/10/2016 | | Date | |
| | Date 3/10/2016 you attach additional pages to You No Yes | | Date r Individuals Filing for Bankruptcy (Official Form 107)? | |
| Did y | Date 3/10/2016 you attach additional pages to You No Yes | ur Statement of Financial Affairs fo | Date r Individuals Filing for Bankruptcy (Official Form 107)? | |

| Debtor Dimarie 16-08352 Doc 1 Filed | d 03/10/16 Entered 03/10/16 14:42:00 Desc Main cument Page 68 of 70 ——————————————————————————————————— |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 First Name Middle Name | Last Name Page 08 01 known) |
| Part 2: List Your Unexpired Personal Property Le | eases |
| For any unexpired personal property lease that you listed in information below. Do not list real estate leases. Unexpired unexpired personal property lease if the trustee does not as | Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the leases are leases that are still in effect; the lease period has not yet ended. You may assume an ssume it. 11 U.S.C. § 365(p)(2). |
| Describe your unexpired personal property leases | Will the lease be assumed? |
| Lessor's name: | ☐ No ☐ Yes |
| Description of leased property: | |
| Lessor's name: | □ No □ Yes |
| Description of leased property: | |
| Lessor's name: | ☐ No ☐ Yes |
| Description of leased property: | |
| Lessor's name: | ☐ No ☐ Yes |
| Description of leased property: | |
| Lessor's name: | ☐ No ☐ Yes |
| Description of leased property: | |
| Lessor's name: | □ No Yes |
| Description of leased property: | |
| Lessor's name: | □ No □ Yes |
| Description of leased property: | |
| Part 3: Sign Below | |
| | ny intention about any property of my estate that secures a debt and any personal property |
| ✓ Is/ Dimarie Vazquez Signature of Debtor 1 | Signature of Debtor 1 |
| Date 3/10/2016 MM/DD/YYYY | Date MM/DD/YYYY |
| | |

Case 16-08352 Doc 1 Filed 03/10/16 Entered 03/10/16 14:42:00 Desc Main Bocument BANKBURG 03/10/16 14:42:00 Desc Main Northern District of Illinois

| In re: | Vazquez, Dimarie | Case No | |
|----------------|-----------------------------------------|---------------------------------------------------|--------------------------------------|
| _ | Debtor(s) | | |
| | | Chapter. | Chapter7 |
| | | OF OPENITOR MATRIX | |
| | VERIFI | CATION OF CREDITOR MATRIX | |
| | The above named Debtors hereby verify t | hat the attached list of creditors is true and co | rrect to the best of their knowledge |
| | | | |
| Date: | 3/10/2016 | /s/ Vazquez, Dimarie | RV |
|) ! | | Vazquez, Dimarie Signature of Debtor | |

| Debtor 1 Dimari Case 16-08352 Doc 1 | Filed 03/10/16 | Entered | L03#10/1º6 | (1/44:4/2: 00 | — Desc Ma | in |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|------------------------------|--------------------|--------------------------|---------------------------------------|---------------------------|
| First Name Middle Name | Document Last Name | Page 70 | of 70 | Col | lumn B | |
| | | | Debtor 1 | De | btor 2 or n-filing spouse | |
| 8. Unemployment compensation | | | \$0.00 | ay gana | | |
| Do not enter the amount if you contend that the amount Social Security Act. Instead, list it here: | 1 | ler the | | | | |
| For you | \$0.00 | | | | | |
| For your spouse | \$0.00 | | | | | |
| Pension or retirement income. Do not include any ar benefit under the Social Security Act. | | | \$0.00 | | · · · · · · · · · · · · · · · · · · · | |
| 10.Income from all other sources not listed above.S Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below. | Security Act or payments manity, or international or | | | | | |
| | | | +\$0.00 | | | |
| Total amounts from separate pages, if any. | | | 40.00 | | | 1_ |
| Calculate your total current monthly income. Add column. Then add the total for Column A to | d lines 2 through 10 for ear for Column B. | ch | \$ <u>4,749.66</u> | . + | | \$4,749.66 Total current |
| | | | | | | monthly income |
| Part 2: Determine Whether the Means Test | Applies to You | | | | | |
| 12. Calculate your current monthly income for the year | ar. Follow these steps: | | | | | |
| 12a. Copy your total current monthly income from line 1 | 11. | | | Copy line 11 | here → | <u>\$4,749.66</u> |
| Multiply by 12 (the number of months in a year). | | | | | | X 12 |
| 12b. The result is your annual income for this part of th | e form. | | | | 12b | \$56,995.92 |
| 13 Calculate the median family income that applies to | o vou. Follow these steps: | | | | | |
| To Galculate the median family mooms that approve | Illinois | | | | | |
| Fill in the state in which you live. | IIIIIOI3 | | | | | |
| Fill in the number of people in your household. | 4 | | | | | |
| Fill in the median family income for your state and size | | | | | 13 | 3. <u>\$86,818.00</u> |
| To find a list of applicable median income amounts, go instructions for this form. This list may also be available | o online using the link spec e at the bankruptcy clerk's | ified in the sepa office. | rate | | | |
| 14. How do the lines compare? | | | | | | |
| 14a. Line 12b is less than or equal to line 13. On the Go to Part 3. | he top of page 1, check bo | x 1, There is no | presumption of a | abuse. | | |
| 14b. Line 12b is more than line 13. On the top of p Go to Part 3 and fill out Form 122A-2. | age 1, check box 2, The pr | esumption of ab | ouse is determine | d by Form 122 | A-2. | |
| Part 3: Sign Below | | | | | | |
| | | - | | W. V | W | |
| By signing here, I declare under penalty of perjury that | at the information on this st | atement and in | any attachments | is true and cor | rect. | |
| ✗ /s/ Dimarie Vazquez | | × | | | | |
| Signature of Debtor 1 | | Signatu | re of Debtor 2 | | | |
| A CONTRACTOR OF SERVICE . | | -U20 Arm | | | | |
| Date 3/10/2016 MM/DD/YYYY | | Date _ | MM/DD/YYYY | | | |
| If you checked line 14a, do NOT fill out or file Form | | | | | | |